Form **2350**

Application for Extension of Time To File U.S. Income Tax Return

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

For U.S. Citizens and Resident Aliens Abroad Who Expect To Qualify for Special Tax Treatment

▶ See instructions on page 3.

Please print or		Your first name and initial		Last name	Last name		Your social security number	
type.	If a	joint retur	n, spouse's first name and initial	Last name		Spous	e's social security number	
File by the due date for								
filing your return.	City	or town,	province or state, and country (incl					
			Please fill in t	he Return Label at th	ne bottom of th	nis page.		
1	reque	st an ex	tension of time until		to file my in	come tax return	for the calendar year 2005,	
		-	ar ending			-		
	-	recial tax treatment by meeting the "bona fide residence test" or the "physical presence test" (see instructions).						
	, , , , , , , , , , , , , , , , , , , ,							
4a Date you first arrived in the foreign country								
b l	Date qualifying period begins ; ends							
c `	Your foreign home address							
d l	Date you expect to return to the United States							
ı	Note. This is not an extension of time to pay tax. Full payment is required to avoid interest and late payment charges.							
5 I	Enter t	he amo	unt of income tax paid with	this form			5	
it is true	e, correc	t, and cor	r, I declare that I have examined the highest and, if prepared by someon	e other than the taxpayer, that	g schedules and state I am authorized to pre	epare this form.		
Signature of taxpayer ▶								
Signature of spouse						Date ▶		
Signature of preparer other than taxpayer ►						Date ►		
			rn Label below with your name want it sent to another address					
			We have approved your ap				(Do not detach)	
Notic Appli			We have not approved you However, we have granted considered a valid extension	a 45-day grace period to				
То	Ве		considered a valid extension of time for elections otherwise required to be made on a timely return. We have not approved your application. After considering the above information, we cannot grant your request for an extension of time to file. We are not granting a 45-day grace period.					
by the IRS We cannot consider your application because it was filed after the due date of your return. Other							return.	
				Director			 Date	
(e)	Taxpay	er's name	e (and agent's name, if applicable).		se's name.	Taxpay	er's social security number	
or typ								
se D	Number and street (include suite, room, or apt. no.) or P.O. box number					Spouse	's social security number	
Retu (Plea	City or town, province or state, and country (including postal or ZIP code)					Always include tax	Agents: payer's name on Return Label.	